



**COUNTY CLERK MONTHLY REPORT  
FOR MANUFACTURED HOME  
INSTALLATION DECAL SALES**

1. Please type or print legibly.
2. Complete **all** columns.
3. DISTRIBUTION
  - a. Original - Department
  - b. Retain copy for records

Report for Month of: \_\_\_\_\_  
Month Year

Page \_\_\_\_\_ of \_\_\_\_\_

County: \_\_\_\_\_

City of Office: **«Email»** \_\_\_\_\_

Name & Signature of Authorized Representative: \_\_\_\_\_

DECAL # Place label here	RETAILER OR INSTALLER?	NAME AND CITY OF COMPANY	LICENSE ID NUMBER	EXPIRATION DATE
1)	<input type="checkbox"/> R <input type="checkbox"/> I			
2)	<input type="checkbox"/> R <input type="checkbox"/> I			
3)	<input type="checkbox"/> R <input type="checkbox"/> I			
4)	<input type="checkbox"/> R <input type="checkbox"/> I			
5)	<input type="checkbox"/> R <input type="checkbox"/> I			
6)	<input type="checkbox"/> R <input type="checkbox"/> I			
7)	<input type="checkbox"/> R <input type="checkbox"/> I			
8)	<input type="checkbox"/> R <input type="checkbox"/> I			
9)	<input type="checkbox"/> R <input type="checkbox"/> I			
10)	<input type="checkbox"/> R <input type="checkbox"/> I			

**Total number of decals sold:** \_\_\_\_\_ **x \$37.00 = \$** \_\_\_\_\_

Please make checks payable to the Department of Commerce & Insurance.

**Remit by the 20th** Dept. of Commerce & Insurance, Manufactured Housing Section  
**of the following** 500 James Robertson Pkwy, 10<sup>th</sup> Floor  
**month to:** Nashville, TN 37243-1162